Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective November 10, 1998

09/453234

CLAIMS AS FILED - PART I						SMALL ENTITY		OTHER THAN		
			olumn 1)	(Colu		TYPE		OR	SMALL	ENTITY
FOR		NUMBE	NUMBER FILED		NUMBER EXTRA		FEE		RATE	FEE
ВА	SIC FEE		,				380.00	OR		760.00
то	TAL CLAIMS	42	5 minus 2	0= * 25		X\$ 9=		OR	X\$18=	458.00
INDEPENDENT CLAIMS & minus 3 = * 3						X39=		OR	X78=	234.00
MU	LTIPLE DEPEN	DENT CLAIM P	RESENT	+130=		OR	+260=			
* If	the difference	in column 1 is	less than ze	TOTAL		OR	TOTAL	1444.50		
	C	LAIMS AS A	MENDED				4	OTHER		
		(Column 3)	SMALL	ENTITY	OR	SMALL	ENTITY			
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	* 46	Minus	* 45	= /	X\$ 9=		OR	X\$18=	18.
	Independent	* 6	Minus	*** 6	= ~~	X39=		OR	X78=	
F	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDENT CLAIM		+130=		OR	+260=	
						TOTAL			TOTAL	
l				(a 1 a)	(0.1	ADDIT. FEE		On	ADDIT. FEE	
_		(Column 1) CLAIMS		(Column 2) HIGHEST	(Column 3)	<u></u>	ADDI	1 1		ADDI-
AMENDMENT B	C	REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEÆ		RATE	TIONAL FEE
	Total	· 43	Minus	** 46	=	X\$ 9=		ÓΒ	X\$18=	
	Independent	* 6	Minus	*** 6	= /	X39₹		OR	X78=	
Ľ	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDENT CLAIM			/	1	000	
						+130=		OR	+260=	
1						TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	L
		(Column 1)		(Column 2)	(Column 3)			•		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**	=	X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	=	X39=		OR	X78=	
Ľ	FIRST PRESE									
	If the entry in colu	ımn 1 ie leee than t	he entry in colu	mn 2, write "0" in co	lumn 3	÷130=	·	OR	+260=	
0.0	If the "Highest Nu *If the "Highest Nu	ımber Previously P ımber Previously P	aid For" IN THI Paid For" IN THI	S SPACE is less that S SPACE is less that	in 20, enter "20." in 3, enter "3."	TOTAL ADDIT. FEE r found in the ap			TOTAL ADDIT. FEE	

This Form for INTERNAL PTO USE ONLY It does NOT get mailed to the applicant.

NOTICE OF FILING / CLAIM FEE(S) DUE (CALCULATION SHEET)

APPLICATION NUMBER: 09/453 234

Total Fee Calculation

		Total	Number					
	Fee Code	# Claim's	Extra X	Fee	Fee =	Total		
	Sm./Lg.			Sm. Entity	Lg. Entity			
Basic Filing Fee	201/101				760,00 =	760,0		
Total Claims >20	203/103	45 -20 =	<u>25</u> X	<u></u>	18/50 =	450,00		
Independent Claims >3	202/102		<u>3</u> x		28, =	234.00		
Mult. Dep Claim Present	204/104				=			
Surcharge	205/105				130.00 =	130,00		
English Translation	139							
TOTAL FEE CALCULA	ATION				·	157400		
Fees due upon filing the application:								
Total Filing Fees Due	s = \$	1574.00						
Less Filing Fees Subr	nitted - \$							
BALANCE DUE	= \$	1574.00	·					
Office of Initial Paten	t Examination	·						